Step 5

Implementation of the Action Steps for the Continuum of Care Plan

Tasks

- Establish a process for monitoring implementation of the Continuum of Care Plan
- Establish criteria for Continuum of Care Homeless Assistance Project selection

Purpose: This session is designed to outline the importance of establishing a formal and regular process for monitoring the implementation of the Continuum of Care Plan, and in particular how to rank and select projects for McKinney Homeless Assistance funding in the future.

Establish A Process for Monitoring Implementation of the Continuum of Care plan

Trainer should make key points below.

Successful Continuum of Care implementation necessitates that communities establish who will be responsible for ensuring that tasks are accomplished, and progress is monitored.

- In communities where the city or county government has taken the lead in the planning process, it will likely be city or county staff who are responsible for monitoring the implementation of the action steps in the Continuum of Care Plan.
- Many communities also create a monitoring committee or establish regularly scheduled community meetings where progress on the plan's implementation is reported.

Regardless of who is responsible, roles and responsibilities must be clear and a regular meeting schedule established to ensure an ongoing, year-long planning process.

Sample Project Selection Criteria for Homeless Assistance Funding

- Degree to which project fills a priority gap in the Continuum of Care
- Provider capacity to implement and manage proposed project
- Experience working with target populations · Cost effectiveness (per unit per capita)
- Leveraging of non-HUD funds
- · Consideration of criteria imposed by other funders
- Existing or planned linkages with other parts of the Continuum of Care
 Quality of application: clarity and soundness of project plan
- · Degree to which project meets HUD's goals

Mechanism for Ranking Proposed McKinney- Funded Projects

Decide up-front how potentially competing projects will be reviewed and ranked. Options include

- · Formation of a selection committee representing broad interest
- Evaluation by the participants of the Continuum of Care Planning process
- · Recruiting a third party



Trainer can use Overhead 5-1 to outline possible criteria for project selection, and 5-2 for possible mechanisms, in addition to eliciting ideas from participants.

Establish Criteria for Continuum of Care Homeless Assistance Project Selection

Trainer should make key points below.

A primary action step for the Continuum of Care plan will be application for Continuum of Care Homeless Assistance funding. Communities should develop some selection and ranking criteria for prioritizing projects for McKinney Homeless Assistance funding. This is especially important for larger communities that may have multiple potential projects competing for funding, or may be confronting competition among renewal requests and new projects.

The single most important factor is that projects requesting McKinney Homeless Assistance funding address priority gaps in relationship to the community's identified relative priorities.

In addition, communities will need a mechanism for ranking and selecting projects for Continuum of Care Homeless Assistance funding. Any mechanism would need to demonstrate that decisions were based on pre-established selection criteria that are logical and fair.

- Criteria might include capacity to implement and manage the proposed project, experience working with the target population, cost effectiveness, etc.
- Communities should emphasize and even rank projects based on the project's ability to articulate achievable outcome measures against which the project can be evaluated in future years. This is especially important as projects come up for renewal funding and communities must try to assess performance.
- Communities should ensure a fair and efficient process. This might include the formation of a selection committee, use of a standing committee on homelessness, or use of staff of a lead agency (city or homeless coalition).

Outcomes

- On-going oversight, monitoring and accountability for Continuum of Care implementation
- Fair process for McKinney project selection consistent with priority gaps

Case Study

Kentucky – Planning Process

Prior to 1993, metropolitan areas and rural counties developed their own relationships with HUD and other funding sources, operating separately from one another. Then the Kentucky Housing Corporation, the state housing finance agency, coordinated a statewide planning process. The state was divided into 15 geographic Area Development Districts (ADD) to enhance regionalized planning for homeless services and funding. Each ADD in turn formed a Local Homeless Planning Board to assess existing resources, identify gaps in services, and develop priorities for project proposals, to be submitted to the State Continuum of Care Planning Board. The local and state boards have both benefited from the opportunity to work collaboratively-bringing urban and rural groups together, sharing information, discovering hidden resources, and, through a consensus-building process, coming to agree on needs and priorities.

Implementation

The statewide Continuum of Care planning process forced participants to take a closer look at resources and needs and to fill service gaps with the priorities identified and has brought forth new systems of communication and decision-making that are likely to continue to leverage other dollars and assure that limited resources are used efficiently. Providers throughout the state have acknowledged the benefits of maximizing what each does well and developing collaborative planning strategies to fill in service delivery gaps without duplicating services. The process of planning for integrated and coordinated services has also strengthened the network of housing and services funded by an array of other HUD funds.

The local and state planning boards continue to meet on a regular basis to plan, share resources, review cases and address systems problems.

Current Operation of Continuum of Care

Across the state, public and nonprofit providers of homeless services, for the most part, have had positive experiences in developing a planning process for the Continuum of Care applications-new relationships have been forged, resources have been discovered and shared, duplication of services has been minimized, and statewide and regional goals and priorities have been established. While differences in philosophy and priorities emerged during the planning process, most participants were satisfied with using a consensus-building process to resolve differences and solve problems.

Creating formal structures that encourage communication and collaboration has reduced the sense of isolation that many rural providers had experienced and has encouraged smaller organizations to join forces in advocating for system-wide improvements. Key to the planning and implementation of the Continuum of Care approach was the support and involvement of political, governmental, and media players.

Source: U.S. Department of Housing and Urban Development, *The Continuum of Care: A Report on the New Federal Policy to Address Homelessness*, December 1996 (prepared by Barnard-Columbia Center for Urban Policy, Columbia University).